

**BLANK VOUCHER FOR PURCHASES AT
SERVICES OTHER THAN PERSONAL**

Bu. Vou. No. 34

U. S. COST REIMBURSABLE

(Department, bureau, or establishment)

Voucher prepared at

(Give place and date)

THE UNITED STATES, Dr.,

Payee's Account No.

To

(Payee)

PAID BY

Encl #3
DDO-1697-59
COPY 1 OF 2

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Costs				\$3,416.	88

PAYMENT:

Complete ☐
Partial ☐
Final ☐

Use continuation sheet(s) if necessary

Shipped from to Weight Government B/L No. Total \$3,416.88

I certify that the above bill is correct and just and that payment has not been received.

(Payee must NOT use this space)

(Sign original only)

Differences

FOIAB3B
Date 2-24-79 *Payee

(Signed when a like certificate is made by payee on attached bill or bills)

Amount verified; correct for
(Signature or initials) *EL*

\$3,416.88

Contract No. 104-a-501 Date Req. No. Date Invoice Rec'd.

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Approved for \$

† (Authorized Certifying Officer)

By

**SIGN
ORIGINAL
ONLY**

Title

Title

Date

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

25X1

Paid by { Check No. dated 19 States in favor of
Cash, \$, on 19 Payee (payee named above.)
(Sign original only)

* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$" and over his official title.

Per Title

Bureau Voucher for Purchases

Services Other Than Personal

CONTINUATION SHEET

U. S. _____ (Department, bureau, or establishment) Sheet No. 1 of Bureau Voucher No. 34

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Contract <u>NY-A-501</u> (CDP-4)					
		Direct Costs Properly Chargeable to Contract _____ for the period 1-1-59 thru 2-1-59					
	<u>MJO 4049</u>						
					Research & Development		Total
		Labor for the period 1-1-59 thru 1-4-59		120.48			
		Labor for the period W/E 1-11-59		431.15			
		Labor for the period W/E 1-18-59		353.08			
		Labor for the period W/E 1-25-59		277.02			
		Labor for the period W/E 2-1-59		309.12		1,490.85	
		Overhead at approved interim rate: Research & Development - 115%		1,714.48		1,714.48	
		Total Costs				3,205.33	
		G & A at Interim Rate: 6.6% of \$3,205.33				211.55	
		Total Billing				3,416.88	